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Bib Data Sheet

CONFIRMATION NO. 9395

SERIAL NUMBER 09/842,641	FILING DATE 04/27/2001 RULE	CLASS 435	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. P06155US01
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APPLICANTS

Jean-Francois Bouquet, Ste consorce, FRANCE;
 Catherine Cleuziat, Lyon, FRANCE;
 Jacques Samarut, Villeurbanne, FRANCE;
 Philippe Desmettre, Ecully, FRANCE;

** CONTINUING DATA *****

CON
 THIS APPLICATION IS A DIV OF 09/194,025 02/12/1999 US 6,255,108
 WHICH IS A 371 OF PCT/FR97/00897 05/22/1997

** FOREIGN APPLICATIONS *****

FRANCE 96 06 630 05/23/1996

IF REQUIRED, FOREIGN FILING LICENSE

GRANTED ** 05/11/2001

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	FRANCE	1	14	2
Verified and Acknowledged	<i>JK</i>	Examiner's Signature	Initials		

ADDRESS

00881

TITLE

Immortal avian cells Producing Viruses Utilizing Immortal Avian Cells

FILING FEE RECEIVED 7.10	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

00881

TITLE

IMMORTAL AVIAN CELLS

FILING FEE RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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